

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

**REQUEST FOR PATENT FEE REFUND**

1 Date of Request: <u>1/7/05</u>		2 Serial/Patent # <u>10/520,818</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
<input checked="" type="checkbox"/> Filing (FC 2632 to 2641)			<u>01-01-05</u>
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$
		7 TOTAL AMOUNT OF REFUND	<u>\$ 200.00</u>
		8 TO BE REFUNDED BY:	
10 REASON:		<input type="checkbox"/> Treasury Check <input type="checkbox"/> Credit Deposit A/C #: <u>60302239</u> <input type="checkbox"/> Credit Card Refund Total: <u>\$200.00</u> <u>EXD.: XXXXXXXXXXXX2621</u>	
<input checked="" type="checkbox"/> Overpayment			
Duplicate Payment			
No Fee Due (Explanation):  <u>Fee Code Corrective</u>			
11 REFUND REQUESTED BY:		TYPED/PRINTED NAME: <u>B. Campbell</u> TITLE: _____ SIGNATURE: <u>BDC</u> PHONE: <u>103 308-9140</u> OFFICE: <u>PCT/DO/EO</u> EXT 217	
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: _____		DATE: _____	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B